

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 16 / 2012</div> </div>		

  

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div>		
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2535.61</div>		
City Washington	State DC	Zip Code 20036	Transaction ID : D450338		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">254842.65</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div>		
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">845.47</div>		
City Washington	State DC	Zip Code 20036	Transaction ID : D450340		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">18083.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">3381.08</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 16 / 2012

Full Name (Last, First, Middle Initial) of Payee

AFSCME Special Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

Mailing Address 1625 L Street, NW

Amount

1690.14

City

Washington

State

DC

Zip Code

20036

Transaction ID : D450341

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State: FL

☒ Senate

District: 00

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CONNIE MACK

Calendar Year-To-Date Per Election  
for Office Sought

39530.07

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

AFSCME Special Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

Mailing Address 1625 L Street, NW

Amount

845.47

City

Washington

State

DC

Zip Code

20036

Transaction ID : D450343

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TOM SMITH

Calendar Year-To-Date Per Election  
for Office Sought

15249.03

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2535.61

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 16 / 2012</div> </div>		

  

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div>		
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1690.14</div>		
City Washington	State DC	Zip Code 20036	Transaction ID : D450344		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">39530.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div>		
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">845.47</div>		
City Washington	State DC	Zip Code 20036	Transaction ID : D450346		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">15249.03</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">2535.61</div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"></div>

  

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Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 16 / 2012</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div></div>	
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2535.61</div>	
City Washington	State DC	Zip Code 20036		
Purpose of Expenditure In Kind Staff		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">254842.65</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>AFSCME Special Account</b>			Date <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</div></div>	
Mailing Address 1625 L Street, NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">845.47</div>	
City Washington	State DC	Zip Code 20036		
Purpose of Expenditure In Kind Staff		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">18083.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">3381.08</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 2789.98	
City Washington	State DC	Zip Code 20001	Transaction ID : D450355
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 899.01	
City Washington	State DC	Zip Code 20001	Transaction ID : D450356
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3688.99
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 541.66	
City Washington	State DC	Zip Code 20001	Transaction ID : D450358
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18083.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 541.66	
City Washington	State DC	Zip Code 20001	Transaction ID : D450359
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15249.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1083.32
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			MM / DD / YYYY 09 / 16 / 2012		

  

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>			Date MM / DD / YYYY 09 / 14 / 2012		
Mailing Address 100 Indiana Avenue, N.W.			Amount 628.14		
City Washington	State DC	Zip Code 20001	Transaction ID : D450360		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 13396.98			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>			Date MM / DD / YYYY 09 / 14 / 2012		
Mailing Address 100 Indiana Avenue, N.W.			Amount 628.14		
City Washington	State DC	Zip Code 20001	Transaction ID : D450361		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 13396.98			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1256.28
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date MM / DD / YYYY 10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 899.01	
City Washington	State DC	Zip Code 20001	Transaction ID : D450362
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 541.66	
City Washington	State DC	Zip Code 20001	Transaction ID : D450363
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15249.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1440.67
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Ms. Elizabeth H Shuler

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Date

MM / DD / YYYY  
10 / 16 / 2012

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 2789.98	
City Washington	State DC	Zip Code 20001	Transaction ID : D450364
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 100 Indiana Avenue, N.W.		Amount 541.66	
City Washington	State DC	Zip Code 20001	Transaction ID : D450365
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18083.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3331.64
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1325 Massachusetts Ave. NW		Amount 51.79	
City Washington	State DC	Zip Code 20005	Transaction ID : D450366
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1325 Massachusetts Ave. NW		Amount 51.79	
City Washington	State DC	Zip Code 20005	Transaction ID : D450367
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	103.58
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 16 / 2012</div> </div>		

  

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 14 / 2012</div>		
Mailing Address 1325 Massachusetts Ave. NW			Amount <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;">51.79</div>		
City Washington	State DC	Zip Code 20005	Transaction ID : D450368		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;">39530.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)			Date <div style="display: flex; justify-content: space-around; border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 14 / 2012</div>		
Mailing Address 1325 Massachusetts Ave. NW			Amount <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;">51.79</div>		
City Washington	State DC	Zip Code 20005	Transaction ID : D450369		
Purpose of Expenditure In Kind Staff		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00		
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;">254842.65</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;">103.58</div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date 

MM / DD / YYYY  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 757.03	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D450373
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 301.86	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D450375
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1058.89
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00484287       </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 16 / 2012</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 14 / 2012</div> </div>	
Mailing Address 11720 Beltsville Drive #700			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">182.18</div>	
City Beltsville	State MD	Zip Code 20705		
Purpose of Expenditure In Kind Staff	Category/ Type	001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="border: 1px solid black; padding: 2px; text-align: right;">13396.98</div>				

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 09 / 14 / 2012</div> </div>	
Mailing Address 11720 Beltsville Drive #700			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">182.18</div>	
City Beltsville	State MD	Zip Code 20705		
Purpose of Expenditure In Kind Staff	Category/ Type	001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="border: 1px solid black; padding: 2px; text-align: right;">13396.98</div>				

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">364.36</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
		MM / DD / YYYY 09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 301.86	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D450378
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Plasterers' Cement Masons' &amp; Shop Hands Political Action Committee</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 11720 Beltsville Drive #700		Amount 757.03	
City Beltsville	State MD	Zip Code 20705	Transaction ID : D450379
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1058.89
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 555 New Jersey Ave. N.W.		Amount 204.59	
City Washington	State DC	Zip Code 20001	Transaction ID : D462859
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13396.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>AFT Solidarity 527</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 555 New Jersey Ave. N.W.		Amount 204.59	
City Washington	State DC	Zip Code 20001	Transaction ID : D462860
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOMMY G THOMPSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 13396.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	409.18
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

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MM / DD / YYYY  
10 / 16 / 2012

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>APWU Separate Segregated Super PAC Account</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1300 L Street, NW		Amount 245.57	
City Washington	State DC	Zip Code 20005	Transaction ID : D463046
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 39530.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>APWU Separate Segregated Super PAC Account</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1300 L Street, NW		Amount 38.11	
City Washington	State DC	Zip Code 20005	Transaction ID : D463047
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15249.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	283.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

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Date

MM / DD / YYYY  
10 / 16 / 2012

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>APWU Separate Segregated Super PAC Account</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1300 L Street, NW		Amount 283.68	
City Washington	State DC	Zip Code 20005	Transaction ID : D463048
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>APWU Separate Segregated Super PAC Account</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 1300 L Street, NW		Amount 38.11	
City Washington	State DC	Zip Code 20005	Transaction ID : D463049
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18083.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	321.79
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

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10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C

C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 16 / 2012D D / Y Y Y Y Y Y  
16 / 2012Y Y Y Y Y Y  
2012

Full Name (Last, First, Middle Initial) of Payee

APWU Separate Segregated Super PAC Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012D D / Y Y Y Y Y Y  
14 / 2012Y Y Y Y Y Y  
2012

Mailing Address 1300 L Street, NW

City

Washington

State

DC

Zip Code

20005

Amount

283.68

Transaction ID : D463050

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State:

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Willard Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

254842.65

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

APWU Separate Segregated Super PAC Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012D D / Y Y Y Y Y Y  
14 / 2012Y Y Y Y Y Y  
2012

Mailing Address 1300 L Street, NW

City

Washington

State

DC

Zip Code

20005

Amount

38.11

Transaction ID : D463051

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☒ House

State: PA

☐ Senate

District: 12

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

KEITH ROTHFUS

Calendar Year-To-Date Per Election  
for Office Sought

18083.04

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

321.79

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012D D / Y Y Y Y Y Y  
16 / 2012Y Y Y Y Y Y  
2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Workers' Voice

FEC IDENTIFICATION NUMBER ▼

C C00484287

Check If ☐ 24-hour report ☒ 48-hour report☐ New report ☒ Amends report filed onM M / D D / Y Y Y Y Y Y  
09 / 16 / 2012

16

2012

Full Name (Last, First, Middle Initial) of Payee

APWU Separate Segregated Super PAC Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

14

2012

Mailing Address 1300 L Street, NW

City

Washington

State

DC

Zip Code

20005

Amount

245.57

Transaction ID : D463052

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State: FL

☒ Senate

District: 00

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CONNIE MACK

Calendar Year-To-Date Per Election  
for Office Sought

39530.07

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

APWU Separate Segregated Super PAC Account

Date

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

14

2012

Mailing Address 1300 L Street, NW

City

Washington

State

DC

Zip Code

20005

Amount

38.11

Transaction ID : D463053

Purpose of Expenditure  
In Kind StaffCategory/  
Type 001

Office Sought:

☐ House

State: PA

☒ Senate

District: 00

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TOM SMITH

Calendar Year-To-Date Per Election  
for Office Sought

15249.03

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

283.68

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

16

2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 09 / 16 / 2012</div>	

  

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 09 / 14 / 2012</div>	
Mailing Address 4031 Executive Park Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22.95</div>	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463153
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Bob Casey		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">15249.03</div>		2012	

  

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 09 / 14 / 2012</div>	
Mailing Address 4031 Executive Park Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22.95</div>	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463154
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">254842.65</div>		2012	

  

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">45.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Signature \_\_\_\_\_ Date 

MM / DD / YYYY  
10 / 16 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY	MM / DD / YYYY
		09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 4031 Executive Park Drive		Amount 22.95	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463155
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18083.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 4031 Executive Park Drive		Amount 22.95	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463156
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 254842.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	45.90
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 22  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Workers' Voice</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484287	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 09 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 4031 Executive Park Drive		Amount 22.95	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463157
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: KEITH ROTHFUS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 18083.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>Central Pennsylvania Area Labor Federation, AFL-CIO</b>		Date MM / DD / YYYY 09 / 14 / 2012	
Mailing Address 4031 Executive Park Drive		Amount 22.95	
City Harrisburg	State PA	Zip Code 17111	Transaction ID : D463158
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15249.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	45.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	27081.40

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 16 / 2012

Signature